

EUGENE KIM  
453 S SPRING ST STE 400  
LOS ANGELES, CA 90013  
Tel: 213-800-4989

APPEARING IN PRO SE

**UNITED STATES BANKRUPTCY COURT  
CENTRAL DISTRICT OF CALIFORNIA**

In re:  
SPECTRUM LINK, INC.,  
Debtor. vs.

) Case No. 2:21-bk-16403-VZ

) Chapter 7

) Adversary No.: 2:23-ap-01173-VZ

HOWARD M. EHRENBERG, Chapter 7  
Trustee,  
Plaintiff,  
vs.

) **ACKNOWLEDGEMENT OF  
RE-ASSIGNMENT OF JUDGMENT**

) CCP § 673

MILLENNIUM MARKETING  
CONCEPTS INC., a California  
corporation, UNITED CARE  
RESIDENTIAL, INC., a California  
corporation, and ALEX MUKATHE, an  
individual,  
Defendants.

COMES NOW EUGENE KIM, Assignee of Record in this matter, and hereby provides  
the following in support of a RE-ASSIGNMENT OF JUDGMENT:

1) THAT the original Judgment was entered on or about 02/22/2024.

2) THAT a judgment was awarded in the sum of \$2,350.00. against Defendant

UNITED CARE RESIDENTIAL, INC.

1 3) THAT there have been no renewals since the entry of said judgment by this court and  
2 that Assignee of Record has received \$00.00 of judgment from Defendant.

3  
4 4) THAT Defendant UNITED CARE RESIDENTAIL INC., has a last known address of  
5 8608 PARROT AVENUE, DOWNEY, CA 90240.

6 5) THAT EUGENE KIM of 453 S SPRING ST STE 400, LA CA 90013 is the Assignee of  
7 Record.

8 6) THAT I hereby transfer, and re-assign all title rights, and interest in the judgment to  
9 Plaintiff:

10  
11 HOWARD M. EHRENBERG, CHAPTER 7 TRUSTEE at 1875 Century Park East, Suite  
12 1900, Los Angeles, CA 90067.

13  
14 7) THAT I hereby revoke authority of Assignee, EUGENE KIM to recover, compromise,  
15 settle and enforce said judgment and I withdraw all rights and claim to the same without recourse.

16  
17 Signed this \_\_ 4th \_\_ day of December 2024 at Los Angeles, CA

18  
19 X  
20 Assignee of Record  
21 EUGENE KIM



22  
23  
24  
25  
26 Not a Public Notary  
27 Certified on 12/05/2024 page  
28

## ALL- PURPOSE CERTIFICATE OF ACKNOWLEDGMENT

A notary public or other officer completing this certificate verifies only the identity of the individual who signed the document to which this certificate is attached, and not the truthfulness, accuracy, or validity of that document.

State of California }

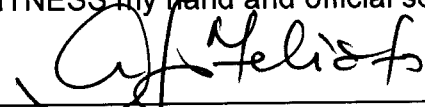
County of Los Angeles }

On December 4, 2024 before me, Carrie T. Felicitas, Notary Public,  
(Here insert name and title of the officer)

personally appeared EUGENE KIM,  
who proved to me on the basis of satisfactory evidence to be the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which the person(s) acted, executed the instrument.

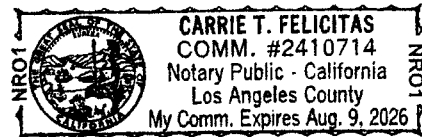
I certify under PENALTY OF PERJURY under the laws of the State of California that the foregoing paragraph is true and correct.

WITNESS my hand and official seal.



Notary Public Signature

(Notary Public Seal)



### ADDITIONAL OPTIONAL INFORMATION

#### DESCRIPTION OF THE ATTACHED DOCUMENT

Acknowledgment of Re-Assignment of

(Title or description of attached document)

Judgment Adv# 2:23-ap01173-VZ

(Title or description of attached document continued)

Number of Pages 2 Document Date 12/3/24

#### CAPACITY CLAIMED BY THE SIGNER

- ☐ Individual (s)  
☐ Corporate Officer

(Title)

- ☐ Partner(s)  
☐ Attorney-in-Fact  
☐ Trustee(s)  
☐ Other \_\_\_\_\_

### INSTRUCTIONS FOR COMPLETING THIS FORM

*This form complies with current California statutes regarding notary wording and, if needed, should be completed and attached to the document. Acknowledgments from other states may be completed for documents being sent to that state so long as the wording does not require the California notary to violate California notary law.*

- State and County information must be the State and County where the document signer(s) personally appeared before the notary public for acknowledgment.
- Date of notarization must be the date that the signer(s) personally appeared which must also be the same date the acknowledgment is completed.
- The notary public must print his or her name as it appears within his or her commission followed by a comma and then your title (notary public).
- Print the name(s) of document signer(s) who personally appear at the time of notarization.
- Indicate the correct singular or plural forms by crossing off incorrect forms (i.e. he/she/~~they~~, is /~~are~~) or circling the correct forms. Failure to correctly indicate this information may lead to rejection of document recording.
- The notary seal impression must be clear and photographically reproducible. Impression must not cover text or lines. If seal impression smudges, re-seal if a sufficient area permits, otherwise complete a different acknowledgment form.
- Signature of the notary public must match the signature on file with the office of the county clerk.
  - ❖ Additional information is not required but could help to ensure this acknowledgment is not misused or attached to a different document.
  - ❖ Indicate title or type of attached document, number of pages and date.
  - ❖ Indicate the capacity claimed by the signer. If the claimed capacity is a corporate officer, indicate the title (i.e. CEO, CFO, Secretary).
- Securely attach this document to the signed document with a staple.